



D 1730  
US

**PAGE 2 OF U.S.A. DECLARATION FORM**  
**(Discard this page in a sole inventor application)**

3 Typewritten Full Name of  
Second Joint Inventor (if any)

VINCENT

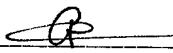
Christophe

Given Name

Middle Initial

Family Name

\*4 Inventor's Signature



5 Date of Signature

05-03-2001

6 Residence

LA ROQUETTE-SUR-SIAGNE

FRANCE

7 Citizenship

French

City

State or Province

Country

8 Post Office Address

(Insert complete mailing  
address, includ. country)

21, chemin du Ferragnon - 06550 LA ROQUETTE-SUR-SIAGNE

FRANCE

3 Typewritten Full Name of  
Third Joint Inventor (if any)

STAWIKOWSKI

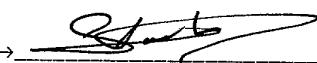
Jean-Marie

Given Name

Middle Initial

Family Name

\*4 Inventor's Signature



5 Date of Signature

→ 05-09-2001

6 Residence

ANTIBES

FRANCE

7 Citizenship

French

City

State or Province

Country

Post Office Address  
(Insert complete mailing  
address, includ. country)

350, chemin de la Parouquine - 06600 ANTIBES

FRANCE

8 Typewritten Full Name of  
Fourth Joint Inventor (if any)

ROUSSEAU

Robert

Given Name

Middle Initial

Family Name

9 Inventor's Signature



10 Date of Signature

→ 09-16-2001

11 Residence

ANTIBES

FRANCE

12 Citizenship

French

City

State or Province

Country

13 Post Office Address  
(Insert complete mailing  
address, includ. country)

N° 833E, Chemin des Combes - Eden Park "E" - 06600 ANTIBES

FRANCE

14 Typewritten Full Name of  
Fifth Joint Inventor (if any)

Given Name

Middle Initial

Family Name

\*4 Inventor's Signature

→

5 Date of Signature

→

6 Residence

City

State or Province

Country

7 Citizenship

8 Post Office Address  
(Insert complete mailing  
address, includ. country)

\* Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

\*\* This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.